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28886 7590 05/04/2004
CLARK HILL, P.C.
500 WOODWARD AVENUE, SUITE 3500
DETROIT, MI 48226

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J.H. Fournier	(Depositor's name)
	(Signature)
8/19/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/807,634	04/16/2001	John Hugh Kerr	19345-86780	2321

TITLE OF INVENTION: ALL GEAR INFINITELY VARIABLE TRANSMISSION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	08/04/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
WILLIAMS, ERIC M	3681	475-230000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Clark Hill PLC

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Ker-Train Holdings Ltd

Kingston, Ontario Canada

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 5

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☐ A check in the amount of the fee(s) is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1739 (enclose an extra copy of this form).

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(Authorized Signature)

Robin W. Asher

(Date)

8/4/2004

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08/06/2004 SDIRETAE 00000002 03607637

01 FC:1501

02 FC:1504

03 FC:6001

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